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CONFIRMATION NO. 9438

<b>SERIAL NUMBER</b> 09/824,536	<b>FILING OR 371(c) DATE</b> 04/02/2001 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3742	<b>ATTORNEY DOCKET NO.</b> SUW-009.01
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/194,060 03/31/2000  
 and is a CIP of 09/536,090 03/24/2000 PAT 6,675,033  
 and is a CIP of 09/549,921 04/14/2000 PAT 6,549,800  
 and is a CIP of 09/191,563 11/13/1998 PAT 6,263,229  
 and is a CIP of 09/817,893 03/26/2001 PAT 6,628,980  
 and said 09/549,921 04/14/2000  
 is a CIP of 09/360,144 07/26/1999 ABN  
 which is a CIP of 08/638,934 04/25/1996 PAT 5,928,145

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***

\*\* 06/01/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 61	<b>INDEPENDENT CLAIMS</b> 8
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**

25181

**TITLE**

SYSTEMS AND METHODS FOR EVALUATING THE URETHRA AND THE PERIURETHRAL TISSUES

<b>FILING FEE RECEIVED</b> 1323	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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